Case 1:15-bk-11713-NWW Doc 1 Filed 04/24/15 Entered 04/24/15 14:11:05 Desc Main Document Page 1 of 47

BI (Official)			United Eas		s Banki strict of						Volu	untary	Petition
	ebtor (if ind Theresa		er Last, First	, Middle):	:		Name	of Joint De	ebtor (Spouse	e) (Last, First	, Middle):		
	All Other Names used by the Debtor in the last 8 years include married, maiden, and trade names):				All Or (include	ther Names de married,	used by the J maiden, and	Joint Debtor trade names	in the last 8	years			
Last four dig	e, state all)	Sec. or Indi	vidual-Taxp	ayer I.D. ((ITIN)/Com	plete EIN	Last fe	our digits o	f Soc. Sec. or	Individual-	Гахрауег I.D	D. (ITIN) No	o./Complete EIN
Street Addre 1660 Je		ail	Street, City,	and State)):	ZIP Code		Address of	Joint Debtor	(No. and St	reet, City, an	nd State):	ZIP Code
County of D) a ai d a m a a a m	of the Dain	aimal Dlaga a	f Dusinss		37406		v of Docide	ence or of the	Dringing Dl	age of Pusin	2001	
Hamilto	n		cipal Place o					•		•			
P.O. Bo	x 24951	`	erent from str	eet addres	ss):		Mailir	ng Address	of Joint Debt	or (if differe	nt from stree	et address):	
Chattan	ooga, TN	l			Γ.	ZIP Code 37422	<u>; </u>						ZIP Code
Location of (if different	Principal A from street	ssets of Bus address abo	siness Debtor ove):	•		01 1							1
(Form	Type of of Organizati	f Debtor	one hov)			of Business	5			of Bankrup Petition is Fi			eh
Individu See Exhib □ Corporat □ Partnersl □ Other (If	ial (includes bit D on page tion (include hip	Joint Debte 2 of this formes LLC and	ors) n. LLP) bove entities,	Sing in 1 Rail Stoo	alth Care Bugle Asset Ro 1 U.S.C. § Iroad ckbroker nmodity Broaring Bank	isiness eal Estate as 101 (51B)	s defined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl	hapter 15 Pe a Foreign M hapter 15 Pe a Foreign N	etition for Re Main Procee etition for Re	eding ecognition
	Chapter 1 lebtor's center		rests:		Tax-Exe (Check box tor is a tax-ex		le) zation	defined	are primarily co	(Check consumer debts, § 101(8) as			are primarily ess debts.
by, regarding	g, or against d	ebtor is pend	ing:		er Title 26 of e (the Interna			1	red by an indivional, family, or				
attach sig	g Fee attached e to be paid in ened application unable to pay	d n installments on for the cou	heck one box s (applicable to art's considerat n installments.	individual	ing that the	t Check	Debtor is not if: Debtor's agg are less than	a small busi regate nonco \$2,490,925 (debtor as defir ness debtor as c	defined in 11 U	C. § 101(51D) J.S.C. § 101(5) cluding debts of	51D). owed to insid	ders or affiliates) ee years thereafter).
			able to chapter urt's considerat			BB.	Acceptances	ng filed with of the plan w	this petition. were solicited pr S.C. § 1126(b).		n one or more	classes of cre	editors,
Debtor e	estimates that estimates that	nt funds will nt, after any	ation I be available exempt prop for distribut	erty is ex	cluded and	administrat		es paid,		THIS	SPACE IS FO	OR COURT	USE ONLY
Estimated N 1- 49	Number of C 50- 99	reditors 100- 199	□ 200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	□ 25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated A So to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion				
Estimated L. \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

Case 1:15-bk-11713-NWW Doc 1 Filed 04/24/15 Entered 04/24/15 14:11:05 Desc

Main Document Page 2 of 47 **B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Turner, Theresa A (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Christian Lanier April 24, 2015 Signature of Attorney for Debtor(s) (Date) **Christian Lanier 4670** Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

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Page 3

B1 (Official Form 1)(04/13)

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Turner, Theresa A

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Theresa A Turner

Signature of Debtor Theresa A Turner

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

April 24, 2015

Date

Signature of Attorney*

X /s/ Christian Lanier

Signature of Attorney for Debtor(s)

Christian Lanier 4670

Printed Name of Attorney for Debtor(s)

Christian Lanier

Firm Name

Suite 412 2158 Northgate Park Lane Chattanooga, TN 37415

Address

Email: Lanierlaw@comcast.net

423-756-1015 Fax: 423-756-1208

Telephone Number

April 24, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Tennessee

In re	Theresa A Turner		Case No.	
		Debtor(s)	Chapter	13
				·

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.		Page	e 2
mental deficiency so as to be incap financial responsibilities.);	able of realizin U.S.C. § 109(articipate in a c	19(h)(4) as impaired by reason of mental illness or ing and making rational decisions with respect to 19(h)(4) as physically impaired to the extent of being a credit counseling briefing in person, by telephone, or bat zone.	ır
☐ 5. The United States trustee or be requirement of 11 U.S.C. § 109(h) does no		ministrator has determined that the credit counseling s district.	
I certify under penalty of perjury	that the infor	ormation provided above is true and correct.	
Signature of		/ Theresa A Turner neresa A Turner	
Date: Apri	l 24, 2015		

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Eastern District of Tennessee

In re	Theresa A Turner		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$20,929.00	2012
\$21,774.00	2013
\$20,200.00	2014

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

B7 (Official Form 7) (04/13)

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS**

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> DATES OF PAYMENTS/ **TRANSFERS**

AMOUNT PAID OR VALUE OF **TRANSFERS**

AMOUNT STILL **OWING**

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING**

4. Suits and administrative proceedings, executions, garnishments and attachments

None П

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately

CAPTION OF SUIT AND CASE NUMBER Debtor v Calvin Sanderfer Docket No. 00-D-1654.

NATURE OF **PROCEEDING** COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

Child Support

Pending

Circuit Court of Hamilton County, Tennessee through Maximus

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY**

 $[^]st$ Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER **Ashley Sandefer**

DESCRIPTION AND VALUE OF PROPERTY **2003 Kia Optima car for daughter to drive**

LOCATION OF PROPERTY
1660 Jeanago Trail, Chattanooga, TN
37406

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15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE I.AW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS GOVERNMENTAL UNIT **NOTICE** LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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B7 (Official Form 7) (04/13)

6

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six vears immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six vears immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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B7 (Official Form 7) (04/13)

7

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None b I

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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B7 (Official Form 7) (04/13)

Q.

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date April 24, 2015
Signature /s/ Theresa A Turner
Theresa A Turner
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Eastern District of Tennessee

In re	Theresa A Turner		Case No.	
		Debtor		
			Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	41,600.00		
B - Personal Property	Yes	3	13,496.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		62,168.12	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		42,120.45	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	3			2,132.35
J - Current Expenditures of Individual Debtor(s)	Yes	2			1,319.27
Total Number of Sheets of ALL Schedu	ıles	23			
	T	otal Assets	55,096.00		
			Total Liabilities	104,288.57	

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Eastern District of Tennessee

In re	Theresa A Turner		Case No.	
-		Debtor		
			Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 12)	2,132.35
Average Expenses (from Schedule J, Line 22)	1,319.27
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	2,349.61

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		11,819.12
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		42,120.45
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		53,939.57

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B6A (Official Form 6A) (12/07)

In re	Theresa A Turner	Case No.	
-		, Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

1660 Jeanaga Trail Chattanooga, TN 37406	Fee Simple	-	41,600.00	43,520.12
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > 41,600.00 (Total of this page)

41,600.00 Total >

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Theresa A Turner	Case No.	
		Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	X			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	First T	ennessee Bank	-	472.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	Х			
4.	Household goods and furnishings, including audio, video, and computer equipment.	House	hold goods	-	500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x			
6.	Wearing apparel.	Wearin	ng Apparel	-	100.00
7.	Furs and jewelry.	Jewelr	у	-	50.00
8.	Firearms and sports, photographic, and other hobby equipment.	Camco	order	-	25.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x			
10.	Annuities. Itemize and name each issuer.	x			
				Sub-Tota	al > 1,147.00

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

In			Debtor ,		
		SC	COntinuation Sheet)	7	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	Х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Note 401(k) @ Amazon after two years of employment	-	1,000.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.		Child Support Calvin Sanderfur - 10 years of arrear owed at \$52.00 each 2 weeks -\$13520.00 - uncollectible: Sanderfur has a social security disability case pending for previous three years	s -	0.00
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars				
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	х			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	Х			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
				Sub-Tot	al > 1,000.00
			(Total	of this page)	1,000,00

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Theresa A Turner	Case No	
_			

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	20	03 Kia Optima 100,000	-	2,600.00
	other vehicles and accessories.	20	10 Kia Forte Coup, 57,000 miles	-	8,749.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 11,349.00 (Total of this page)

Total > 13,496.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Theresa A Turner	Case No.
-		Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT Debtor claims the exemptions to which debtor is entitled under: ☐ Check if debtor claims a homestead exemption that exceeds (Check one box) \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3) with respect to cases commenced on or after the date of adjustment.) Value of Current Value of Specify Law Providing Each Exemption Property Without
Deducting Exemption Description of Property Claimed Exemption **Real Property** 1660 Jeanaga Trail Chattanooga, TN 37406 Tenn. Code Ann. § 26-2-301 0.00 41,600.00 Chapting Sovings or Other Einspeiel Assounts Cartificates of Deposit

Checking, Savings, or Other Financial Accounts, C First Tennessee Bank	ertificates of Deposit Tenn. Code Ann. § 26-2-103	472.00	472.00
Household Goods and Furnishings Household goods	Tenn. Code Ann. § 26-2-103	500.00	500.00
Wearing Apparel Wearing Apparel	Tenn. Code Ann. § 26-2-103	100.00	100.00
<u>Furs and Jewelry</u> Jewelry	Tenn. Code Ann. § 26-2-103	50.00	50.00
<u>Firearms and Sports, Photographic and Other Hob</u> Camcorder	<u>by Equipment</u> Tenn. Code Ann. § 26-2-103	25.00	25.00
Interests in IRA, ERISA, Keogh, or Other Pension o Note 401(k) @ Amazon after two years of employment	r Profit Sharing Plans Tenn. Code Ann. § 26-2-103	1,000.00	1,000.00
Alimony, Maintenance, Support, and Property Settl Child Support Calvin Sanderfur - 10 years of arrears owed at \$52.00 each 2 weeks -\$13520.00 - uncollectible: Sanderfur has a social security disability case pending for previous three years	ements Tenn. Code Ann. § 26-2-103	0.00	0.00
Automobiles, Trucks, Trailers, and Other Vehicles 2003 Kia Optima 100,000	Tenn. Code Ann. § 26-2-103	2,600.00	2,600.00

Tenn. Code Ann. § 26-2-103

Total: 4,747.00 55,096.00

0.00

Software Copyright (c) 1996-2014 - Best Case, LLC - www.bestcase.com

2010 Kia Forte Coup, 57,000 miles

8,749.00

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B6D (Official Form 6D) (12/07)

In re	Theresa A Turner		Case No	
_		Debtor	,	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No.	C O D E B T O R	Hu H V J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN 1660 Jeanaga Trail Chattanooga, TN 37406	COXT_XGEXT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Bank of America Home Loans P.O. Box 5170 Simi Valley, CA 93062		-	Value \$ 41,600.00				43,520.12	1,920.12
Account No.	T	\vdash	2010 Kia Forte Coup, 57,000 miles	Н		\vdash	70,020.12	1,320.12
Kia of Chattanooga 2136 Chapman Road Chattanooga, TN 37421		-	• • •					
	┖		Value \$ 8,749.00	Ш			18,648.00	9,899.00
Account No.			Value \$					
Account No.								
			Value \$					
continuation sheets attached			(Total of t	Subt his p			62,168.12	11,819.12
			(Report on Summary of So		ota ule		62,168.12	11,819.12

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B6E (Official Form 6E) (4/13)

In re	Theresa A Turner		Case No.
-		Debtor	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account he debtor has with the reditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate beled

schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)
Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Subtotals" on each sheet.
"Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Theresa A Turner	Case No.	
-		Debtor	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER J С (See instructions.) Account No. Internal Revenue Service 0.00 **Centralized Insolvency Operation** P.O. Box 7346 Philadelphia, PA 19101-7346 0.00 0.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 0.00 0.00 Total 0.00 (Report on Summary of Schedules) 0.00 0.00

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B6F	(Official	Form	6F)	(12/07)

In re	Theresa A Turner		Case No.	
•		Debtor	,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	Č	Ü	P	7	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBHOR	C A M		N G	DZ1-QD-DAH	U T F		AMOUNT OF CLAIM
Account No.				T	T E D			
American Anesthesiology of Tennessee P.O. Box 535590 Atlanta, GA 30353-5590		-			D			200.00
Account No.				\forall	Г	T	T	
Associated Pathologist c/o Path Group P.O. Box 530814 Atlanta, GA 30353-0814		-						38.82
Account No.				\dashv	\vdash	┝	+	
Associates in Diagnostic Radiology P.O. Box 3145 Indianapolis, IN 46206		-						37.00
Account No.				dash	Н	H	+	
Associates in Diagnostic Radiology P.O. Box 3145 Indianapolis, IN 46206-3145		-						15.79
			S	Subt	ota	ıl	T	
continuation sheets attached			(Total of the					291.61

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B6F (Official Form 6F) (12/07) - Cont.

In re	Theresa A Turner	Case No	
_		Debtor	

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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C H W H	CONSIDERATION FOR CLAIM. IF CLAIM	COXT_XGEXT	DZLLQULDAFED	E	
Account No.	l			ľ	Ė		
Associates in Diagnostic Radiology P.O. Box 3145 Indianapolis, IN 46206-3145		-					77.98
Account No.	T	T					
Associates in Diagnostic Radiology P.O. Box 3145 Indianapolis, IN 46206-3145		-					
							40.98
Account No. AT&T Mobility P.O. Box 536216 Atlanta, GA 30353-6216	x	-					1,694.90
Account No.							
College Admissions Assistance 200 South Virgini St, 8th Floor Reno, NV 89501	x	-					0.00
Account No.	I	t		\vdash		H	
Department of Education Fedloan Servicing P.O. Box 530210 Atlanta, GA 30353-0210		-					28,500.00
Sheet no1 of _7 sheets attached to Schedule of				Subt	ota	.1	30,313.86
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	ge)	30,313.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Theresa A Turner		Case No	
_		Debtor		

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	C	Ü	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No.	C O D E B T O R	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	D A T	DISPUTED	AMOUNT OF CLAIM
The country of	1				E D		
Diagnostic Radiology Consultants P.O. Box 371493 Pittsburgh, PA 15250-7493		-					218.56
Account No.		t					
Donna Hobgood Womens East Pavilion 1751 Gunbarrell Rd. Chattanooga, TN 37421		-					44.82
Account No.	╁	+					
Emergency Physicians Inc. Bay Area Credit Service P.O. Box 467600 Atlanta, GA 31146		-					46.94
Account No.	t	t					
Express Scripts P.O. Box 790227 Saint Louis, MO 63179-0227		-					10.00
Account No.	\dagger	t					
Furr Robert Associates Pathologists c/o Pathgroup P.O. Box 530814 Atlanta, GA 30353-0814		-					38.82
Sheet no. 2 of 7 sheets attached to Schedule of		•		Subt			359.14
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis	pag	e)	i

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B6F (Official Form 6F) (12/07) - Cont.

In re	Theresa A Turner		Case No	
_		Debtor		

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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	F V	C H H	DATE OF A IM WAS INCUIDED AND	CONTINGENT	NL QU	DISPUTED	3	AMOUNT OF CLAIM
Account No.						Ę			
Lefler Lee Chattanooga Imaging 1710 Gunbarrel Rd. Chattanooga, TN 37421		-	-						6.32
Account No.		T						T	
Memorial Health Partners Foundation Billing Office P.O. Box 102125 Atlanta, GA 30368		-	-						204.00
		L						1	304.00
Account No. Mohling Women's Surgery Center P.O. Box 14000 Belfast, ME 04915-4033		_	-						
Account No.		-						1	24.42
On Line Collections P.O. Box 1489 Winterville, NC 28590-1489	-	-	-						0.00
Account No.	┝	+			\vdash		\vdash	+	
Parkridge East Hospital P.O. Box 740757 Cincinnati, OH 45274-0757	•	_	-						1,029.20
Sheet no. 3 of 7 sheets attached to Schedule of				2	Subt	tota	1	\dagger	1 262 04
Creditors Holding Unsecured Nonpriority Claims				(Total of t	his	pag	ge)	L	1,363.94

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B6F (Official Form 6F) (12/07) - Cont.

In re	Theresa A Turner		Case No	
_		Debtor		

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CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	C	U	D I S P	
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AND ACCOUNT NUMBER	T	J	IC CLIDIECT TO CETOEE CO CTATE	N	U	T E	AMOUNT OF CLAIM
(See instructions above.)	Ř	С	is sobject to seroit, so sixte.	NGEN	D		
Account No.		T		Ť	A T E		
				Н	D		
Parkridge East Hospital							
P.O. Box 740757		-					
Cincinnati, OH 45274-0757	ı						
							726.19
Account No.							
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Parkridge East Hospital							
P.O. Box 740757		-					
Cincinnati, OH 45274-0757							
							545.71
Account No.							
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Parkridge Medical Center							
P.O. Box 740757		-					
Cincinnati, OH 45274-0757							
	ı						474.23
Account No.	T	T		П			
	1						
Parkridge Medical Center							
P.O. Box 740757		-					
Cincinnati, OH 45274-0757							
	l						826.37
Account No.	t	T		П		Т	
	1						
Parkridge Medical Center							
P.O. Box 290429		-				l	
Nashville, TN 37229-0429							
							1,788.44
				Ш			1,700.44
Sheet no. 4 of 7 sheets attached to Schedule of				Subt			4,360.94
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his j	pag	ge)	7,000.34

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B6F (Official Form 6F) (12/07) - Cont.

In re	Theresa A Turner		Case No	
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CREDITOR'S NAME,	C	ŀ	usband, Wife, Joint, or Community		C	U N L	P	
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INCLUDING ZIP CODE,	l E	٧	DATE CLAIM WAS INCURRED AND	r	i	l a	l P	
AND ACCOUNT NUMBER	T	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	l l	N	Ü	Ť	AMOUNT OF CLAIM
(See instructions above.)	R		is sebsect to seroit, so state.		NGENT	Ď	D	
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P.O. Box 290429		-						
Nashville, TN 37229-0429								
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Parkridge Medical Center								
P.O. Box 290429		-						
Nashville, TN 37229-0429								
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Account No.	t	t						
	1							
Parkridge Medical Center								
NPAS Solutions LLC		-						
P.O. Box 740757								
Cincinnati, OH 45274-0757								
								408.20
Account No.	t	t						
	1							
Paul Larry								
Assoc in Diagnostic Radiology		-						
P.O. Box 3145								
Indianapolis, IN 46206								
								37.00
Account No.		T						
	1							
PGAC	1							
P.O. Box 305076	1	-						
Nashville, TN 37230-5076								
	1							
								0.00
Sheet no. <u>5</u> of <u>7</u> sheets attached to Schedule of	_		1	S	ubt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Tota					3,924.45
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B6F (Official Form 6F) (12/07) - Cont.

In re	Theresa A Turner	Case No.
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CREDITOR'S NAME,	C	Hu	usband, Wife, Joint, or Community	C	U	P	
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INCLUDING ZIP CODE,	E	w	DATE CLAIM WAS INCURRED AND	T	11	P	
AND ACCOUNT NUMBER	Ţ	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N	ũ	U T E	AMOUNT OF CLAIM
(See instructions above.)	R	С	is subject to setore, so state.	Z G H Z	I D		
Account No.	┢	╁		N	Ă T E D		
The country of	ł				D		
Physician Billing Office							
Memorial Health Partners Foundation		_					
P.O. Box 102125							
1 101 - 011 10-1-0							
Atlanta, GA 30368							
							304.00
Account No.							
	1						
Southeastern Emergency							
HRRG		-					
P.O. Box 459080							
Fort Lauderdale, FL 33345-9080							
,							928.00
Account No.	┢	+		H			
Account No.	ł						
Caring Creek Emera Bhus							
Spring Creek Emerg Phys							
P.O. Box 37980		-					
Philadelphia, PA 19101-7980							
							27.97
Account No.	t	T		П			
	1						
Spring Creek Emerg Phys							
P.O. Box 37980		-					
Philadelphia, PA 19101-7980							
I madeipma, i A 13101 7300							
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Account No.							
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The General Insurance Co	1	1					
Credit Collection Services	1	-			l		
Two Wells Avenue	1	1			l		
Newton Center, MA 02459	1	1			l		
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							55.89
Sheet no. 6 of 7 sheets attached to Schedule of			S	Subt	ota	1	4 224 02
Creditors Holding Unsecured Nonpriority Claims			(Total of the	his į	pag	e)	1,334.83

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B6F (Official Form 6F) (12/07) - Cont.

In re	Theresa A Turner	Case No	
_		Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	٦Τ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	Q U	T E] [AMOUNT OF CLAIM
Account No.				Т	E			
Thomas Carr III 1710 Gunbarrel Rd. Chattanooga, TN 37421		-			D			15.05
Account No.	T	T			T	T	T	
University Surgical Assoc 979 E. 3rd St. Ste. 300 Chattanooga, TN 37403-2187		-						10.00
Account No.	╀	╀		-	⊢	⊢	+	
University Surgical Assoc P.O. Box 6097 Chattanooga, TN 37401-6097		-						99.00
Account No.	╁	╁			┢	H	+	
Women's Surgery Center P.O. Box 14000 Belfast, ME 04915-4033		-						23.21
Account No.	╁	╁		-	├	├	+	
Women's Surgery Center P.O. Box 14000 Belfast, ME 04915-4033		-						24.42
Sheet no7 of _7 sheets attached to Schedule of	_	_		Subt	tota	ı l	†	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				,	171.68
					Γota			
			(Report on Summary of So	hec	lule	es)	, [42,120.45

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B6G (Official Form 6G) (12/07)

In re	Theresa A Turner	Case No.	
_		Debtor ,	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 1:15-bk-11713-NWW Doc 1 Filed 04/24/15 Entered 04/24/15 14:11:05 Desc Main Document Page 33 of 47

B6H (Official Form 6H) (12/07)

In re	Theresa A Turner	Case No.	
-		, Debtor	

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

Ashley Sanderfer
P.O. Box 24951
Chattanooga, TN 37422

Ashley Sanderfer
P.O. Box 536216
Atlanta, GA 30353-6216

College Admissions Assistance
P.O. Box 24951
Chattanooga, TN 37422

Chattanooga, TN 37422

Reno, NV 89501

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Debtor 1 Theresa A Turner Debtor 2 (Secue, # filing) United States Bankruptcy Court for the: EASTERN DISTRICT OF TENNESSEE Case number (Minorial) United States Bankruptcy Court for the: EASTERN DISTRICT OF TENNESSEE Case number (Minorial) Official Form B 6! Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsipping correct information, it you are separated and not filing jointly, and your speaks is living with you, include information about your spouse. If more space is attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer ever the state of the separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address P.O. Box 80726 Seattle, WA 98108 How long employed there? Describe Employment Information Cocupation may include student or homemaker, if it applies. Employer's address P.O. Box 80726 Seattle, WA 98108 How long employed there? One year See Attachment for Additional Employment Information For Debtor 1 For Debtor 2 or non-filling spouse unless you are separated. List monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space, include your inspouse unless you are separate sheet to this form. For Debtor 1 For Debtor 1 For Debtor 2 or non-filling spouse and the deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,772.41 \$ N/A 3. Estimate and list monthly overtime pay. 3. 4 \$ 0.00 4 \$ N/A	
Debtor 2 (Spouse, if thing) United States Bankruptcy Court for the:	
United States Bankruptcy Court for the: EASTERN DISTRICT OF TENNESSEE Case number (If known) Official Form B 6I Schedule I: Your Income Be as complete and accurate as possible. If two married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is a sparate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer ever the properties of the prope	
Case number (If known) Check if this is: An amended filing A supplement showing post-petiti As supplement showing post-petiti An amended filing A supplement showing post-petiti An amended filing Anticome as on the following destroyers Be accomplete in formation about your spouse. If more equally response is living with you, include information about your spouse. If more equally response is living with you, include information about your spouse. If more equally response is living with you, include information about your spouse. If more equally response is living with you, include information about your spouse. If more filing spouse is living with you, include information about your spouse. If more equally response is living with you, include information about your spouse. If more equally response is living with you, do not include information about your spouse. If more filing spouse is living with you, do not include information about your spouse. If more filing spouse is livin	
Official Form B 6I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally respors supplying correct information. If you are married and not filing jointly, and your spouse is living wint you, include information about subject to a separated and your spouse is not filing with you, do not include information about your spouse. If more space is tatach a separate sheet to this form. On the top of any additional apages, write your name and case number (if known). Answer ever attach a separate spage with information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address P.O. Box 80726 Seattle, WA 98108 How long employed there? One year "See Attachment for Additional Employment Information Fart 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your napouse unless you are separated. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,772.41 \$ NAS	
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List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 1,772.41 \$ N/A	ŭ
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$	
3. Estimate and list monthly overtime pay. 3. +\$	<u>\</u>
	<u>\</u>
4. Calculate gross Income. Add line 2 + line 3. 4. \$\\ \\$ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \]

Official Form B 6I Schedule I: Your Income page 1

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Deb	tor 1	Ineresa A Turner	_	Case r	number (<i>if known</i>)			
				For	Debtor 1		Debtor 2 or filing spouse	
	Copy	y line 4 here	4.	\$	1,772.41	\$	N/A	
5.	l iet :	all payroll deductions:						
J.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	78.26	\$	NI/A	
	5a. 5b.	Mandatory contributions for retirement plans	5b.	\$ <u> </u>	20.00	\$ <u> </u>	N/A N/A	
	5c.	Voluntary contributions for retirement plans	5c.	<u>\$</u> —	0.00	\$ <u> </u>	N/A	
	5d.	Required repayments of retirement fund loans	5d.	<u>\$</u> —	0.00	<u>\$</u> —	N/A	
	5e.	Insurance	5e.	\$	69.00	<u>*</u> —	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$		+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	167.26	\$	N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,605.15	\$	N/A	
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c. 8d. 8e.	Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.	\$ \$	0.00 0.00 0.00	\$ \$ \$	N/A N/A N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify: Wilkins Research 577.20 less taxes \$50.00	8h.+	\$	527.20	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	527.20	\$	N/A	
10	Calc	ulate monthly income. Add line 7 + line 9.	10. \$	-	2,132.35 + \$		N/A = \$	2,132.35
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ. Ψ-		-,132.33 · ψ		 	2,132.33
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you refriends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not cify:	r depend	-	•		chedule J.	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certains						2,132.35
							Combin	
13.	Do y ■ □	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	1?				monthly	/ income

Official Form B 6I Schedule I: Your Income page 2

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Debtor 1 Theresa A Turner Case number (if known)	Dahlard Thomas A Turner
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Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation		
Name of Employer	Wilkins Research	
How long employed		
Address of Employer		

Official Form B 6I Schedule I: Your Income page 3

Fill in this i	nformation to identify	YOUR OOOO!				
	nformation to identify yo					
Debtor 1	Theresa A T	Turner			ck if this is:	
Debtor 2					An amended filing A supplement show	wing post-petition chapter
(Spouse, if fi	iling)			-	13 expenses as of	
United State	s Bankruptcy Court for the	e: EASTERN DISTRICT OF	TENNESSEE		MM / DD / YYYY	
Case number (If known)	er				A separate filing fo 2 maintains a sepa	r Debtor 2 because Debtor rate household
Officia	I Form B 6J					
	dule J: Your					40/4/
Be as cominformation	plete and accurate as	s possible. If two married peeded, attach another shee				
	Describe Your Houses a joint case?	ehold				
■ No	o. Go to line 2.	in a separate household?				
	□ No	ıst file a separate Schedule J				
2. Do vo	ou have dependents?	□ No				
•	t list Debtor 1 and	Yes. Fill out this information each dependent			Dependent's age	Does dependent live with you?
Do no	ot state the					□ No
deper	ndents' names.		Child		18	Yes
						□ No
						☐ Yes
						□ No □ Yes
						□ No
						☐ Yes
exper	our expenses include nses of people other t self and your depende	than				
Estimate y	our expenses as of y as of a date after the	ing Monthly Expenses our bankruptcy filing date bankruptcy is filed. If this i	unless you are using this s a supplemental <i>Schedu</i>	form as a sule J, check the	upplement in a Cha he box at the top o	apter 13 case to report of the form and fill in the
	of such assistance an	non-cash government assind have included it on <i>Sche</i>			Your exp	enses
4. The re		ship expenses for your resine ground or lot.	dence. Include first mortga	ge 4. \$	\$	0.00
	included in line 4:	-				
4a.	Real estate taxes			4a. S	2	0.00
4a. 4b.		's, or renter's insurance		4a. 3 4b. 3		0.00 0.00
4c.		epair, and upkeep expenses		4c. S		50.00
4d.		ation or condominium dues		4d. S		0.00
5. Addit		nents for vour residence. su	ch as home equity loans	5. 9		0.00

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Deb	Theresa A Turner	Case number (if known)	
3.	Utilities:		
٥.	6a. Electricity, heat, natural gas	6a. \$	150.00
	6b. Water, sewer, garbage collection	6b. \$	94.27
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	82.00
	6d. Other. Specify:	6d. \$	0.00
	Food and housekeeping supplies	7. \$	300.00
	Childcare and children's education costs	8. \$	0.00
	Clothing, laundry, and dry cleaning	9. \$	100.00
	Personal care products and services	10. \$	100.00
,. .	Medical and dental expenses	11. \$	80.00
	Transportation. Include gas, maintenance, bus or train fare.	· · · · · · · · · · · · · · · · · · ·	00.00
•	Do not include car payments.	12. \$	200.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	Charitable contributions and religious donations	14. \$	0.00
	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	163.00
	15d. Other insurance. Specify:	15d. \$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16. \$	0.00
, .	Installment or lease payments:		0.00
•	17a. Car payments for Vehicle 1	17a. \$	0.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
	Your payments of alimony, maintenance, and support that you did not report		
•	deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I)		0.00
	Other payments you make to support others who do not live with you.	\$	0.00
	Specify:	19.	
	Other real property expenses not included in lines 4 or 5 of this form or on 5		
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
	Other: Specify:	21. +\$	0.00
	Your monthly expenses. Add lines 4 through 21.	22. \$	1,319.27
	The result is your monthly expenses.		
	Calculate your monthly net income.		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,132.35
	23b. Copy your monthly expenses from line 22 above.	23b\$	1,319.27
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	813.08
24.	The result is your monthly net income. Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage? No.	er you file this form?	
	■ No. □ Yes. Explain:		

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Eastern District of Tennessee

In re	Theresa A Turner			Case No.	
			Debtor(s)	Chapter	13
	DECLARATION C	CONCERN	ING DEBTOR'S SO	CHEDUL	ES
	DECLARATION UNDER	PENALTY (OF PERJURY BY INDIV	IDUAL DEI	BTOR
	I declare under penalty of perjury t sheets, and that they are true and correct to t				les, consisting of25
	•				
Date	April 24, 2015	Signature	/s/ Theresa A Turner		
		Ü	Theresa A Turner		
			Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF TENNESSEE

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

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Form B 201A, Notice to Consumer Debtor(s)

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Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Eastern District of Tennessee

	Easter	n District of Tennessee		
In re	Theresa A Turner		Case No.	
		Debtor(s)	Chapter	13
	CERTIFICATION OF N UNDER § 342(b) (OTICE TO CONSUN OF THE BANKRUPT	`	S)
Code.	Cer I (We), the debtor(s), affirm that I (we) have received	tification of Debtor ived and read the attached n	notice, as required by	§ 342(b) of the Bankruptcy
There	sa A Turner	X /s/ Theresa A	Turner	April 24, 2015
Printe	d Name(s) of Debtor(s)	Signature of D	Debtor	Date
Case 1	No. (if known)	X		
		Signature of Jo	oint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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United States Bankruptcy Court Eastern District of Tennessee

In re	Theresa A Turner		Case No.		
		Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX

The above Debtor(s) hereby verifies under the penalty of perjury under the laws of the United States of America that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: April 24, 2015	/s/ Theresa A Turner
•	Theresa A Turner
	Signature of Debtor
Date: April 24, 2015	/s/ Christian Lanier
	Signature of Attorney
	Christian Lanier 4670
	Christian Lanier
	Suite 412
	2158 Northgate Park Lane
	Chattanooga, TN 37415
	423-756-1015 Fax: 423-756-1208

American Anesthesiology Optima Recovery P.O. Box 52968 Knoxville, TN 37950-2968

American Anesthesiology of Tennessee P.O. Box 535590 Atlanta, GA 30353-5590

Ashley Sanderfer P.O. Box 24951 Chattanooga, TN 37422

Associated Pathologist c/o Path Group P.O. Box 530814 Atlanta, GA 30353-0814

Associated Pathologist c/o Frost Arnett P.O. Box 198988 Nashville, TN 37219-8988

Associates in Diagnostic Radiology P.O. Box 3145 Indianapolis, IN 46206

Associates in Diagnostic Radiology P.O. Box 3145 Indianapolis, IN 46206-3145

AT&T

Sunrise Credit Services Inc P.O. Box 9100 Farmingdale, NY 11735-9100

AT&T Mobility P.O. Box 536216 Atlanta, GA 30353-6216

AT&T Mobility Bay Area Credit Service LLC P.O. Box 467600 Atlanta, GA 31146

Bank of America P.O. Box 15222 Wilmington, DE 19886-5222

Bank of America Home Loans P.O. Box 5170 Simi Valley, CA 93062 College Admissions Assistance 200 South Virgini St, 8th Floor Reno, NV 89501

Department of Education Fedloan Servicing P.O. Box 530210 Atlanta, GA 30353-0210

Diagnostic Radiology Consultants P.O. Box 371493 Pittsburgh, PA 15250-7493

Donna Hobgood Womens East Pavilion 1751 Gunbarrell Rd. Chattanooga, TN 37421

Emergency Physicians Inc. Bay Area Credit Service P.O. Box 467600 Atlanta, GA 31146

Express Scripts
P.O. Box 790227
Saint Louis, MO 63179-0227

Furr Robert Associates Pathologists c/o Pathgroup P.O. Box 530814 Atlanta, GA 30353-0814

Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346

Kia of Chattanooga
2136 Chapman Road
Chattanooga, TN 37421

Lefler Lee Chattanooga Imaging 1710 Gunbarrel Rd. Chattanooga, TN 37421

Memorial Health Partners Foundation Billing Office P.O. Box 102125 Atlanta, GA 30368 Mohling Women's Surgery Center P.O. Box 14000 Belfast, ME 04915-4033

On Line Collections P.O. Box 1489 Winterville, NC 28590-1489

Parkridge Meditcredit Inc P.O. Box 1629 Maryland Heights, MO 63043-0629

Parkridge East Hospital P.O. Box 740757 Cincinnati, OH 45274-0757

Parkridge Medical Center P.O. Box 740757 Cincinnati, OH 45274-0757

Parkridge Medical Center NPAS Solutions LLC P.O. Box 740757 Cincinnati, OH 45274-0757

Parkridge Medical Center P.O. Box 290429 Nashville, TN 37229-0429

Paul Larry Assoc in Diagnostic Radiology P.O. Box 3145 Indianapolis, IN 46206

PGAC P.O. Box 305076 Nashville, TN 37230-5076

Physician Billing Office Memorial Health Partners Foundation P.O. Box 102125 Atlanta, GA 30368

Southeastern Emergency HRRG P.O. Box 459080 Fort Lauderdale, FL 33345-9080

Spring Creek Emerg Phys P.O. Box 37980 Philadelphia, PA 19101-7980

The General Insurance Co Credit Collection Services Two Wells Avenue Newton Center, MA 02459

The General Insurance Company Processing Center P.O. Box 55126 Boston, MA 02205-5126

Thomas Carr III 1710 Gunbarrel Rd. Chattanooga, TN 37421

University Surgical P.O. Box 6097 Chattanooga, TN 37401-6097

University Surgical Assoc 979 E. 3rd St. Ste. 300 Chattanooga, TN 37403-2187

University Surgical Assoc P.O. Box 6097 Chattanooga, TN 37401-6097

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